You Call This Patients' Rights?

Adding Up the Casualties of Dingell-Norwood

As a House-Senate conference tries to produce a patients' bill of rights that protects patients and makes health coverage affordable, the Congressional Budget Office (CBO) reports one option, the Dingell-Norwood bill (H.R. 2990), would increase health insurance premiums an average of 4.1 percent. That is over and above the 7.3 percent increase employers and employees shouldered in 1999, and the 7.5 percent increase they are expected to face in 2000.

Estimates from two different economic consulting firms (the Barents Group and the Lewin Group) show **Dingell-Norwood's hefty price tag would cancel coverage for 1.2 million**Americans. This is in addition to the 44 million Americans who already lack coverage. But just how many people is 1.2 million? It's approximately the entire population of New Hampshire. Or the combined populations of Vermont and Wyoming, plus another 100,000 people. In fact, enacting Dingell-Norwood would uninsure as many Americans as:

- Canceling the health insurance of every physician (740,000), physician's assistant (68,000), physical therapist (134,000), respiratory therapist (103,000) and dentist (155,000) in America. Total: 1.2 million.
- Forcing every private sector employer in either the **Boston** or **Detroit** metropolitan area to cancel coverage for every third worker (total private employer coverage: 3.5 million and 3.6 million, respectively).
- Canceling coverage for every other **union worker** in California (total union workers: 2,154,000).
- Canceling employer-based health insurance for nearly every covered private sector worker in the **Cincinnati** metropolitan area (total private employer coverage: 1.3 million).
- Banning private health insurance in West Virginia (total private coverage:
 1 million).
- Canceling employer-based health insurance for nearly half the covered private sector workers in **Houston** (total private employer coverage: 2.6 million).

- Banning individual coverage throughout the New York metropolitan area, including Northern New Jersey and Long Island (total individual coverage: 1 million).
- Canceling employer-based coverage for one-third of covered private sector workers in the **Philadelphia-Wilmington-Atlantic City** metropolitan area (total private employer coverage: 3.6 million).
- Canceling the employer-based coverage of over one out of every four covered private sector workers in the San Francisco-Oakland-San Jose area (total private employer coverage: 4.3 million).
- Canceling the health insurance of over half of the nation's 2,032,000 registered nurses.

Enacting Dingell-Norwood would be like outlawing private health insurance in the congressional districts of:

- House Conferees Joe Scarborough (FL-1), Michael Bilirakis (FL-9), and Porter Goss (FL-14). Combined private coverage: 1.2 million.
- House Conferees **Tom Bliley** (VA-7), **John Shadegg** (AZ-4), and **Bill Archer** (TX-7). Combined private coverage: 1.2 million.
- House Conferees Dan Burton (IN-6), John Dingell (MI-16), and Nancy Johnson (CT-6). Combined private coverage: 1.3 million.
- House Conferees Frank Pallone (NJ-6), Charlie Rangel (NY-15), and Robert Andrews (NJ-1). Combined private coverage: 1.3 million.
- House Conferees Bill Thomas (CA-21), Henry Waxman (CA-29), and Pete Stark (CA-13). Combined private coverage: 1.2 million.
- House Conferees John Boehner (OH-8), James Talent (MO-2), and Bill Clay (MO-1). Combined private coverage: 1.3 million.
- House Conferees Ernest Fletcher (KY-6), Jim McCrery (LA-4), and Marion Berry (AR-1). Combined private coverage: 1.2 million.

Sources: William M. Mercer, Inc., Census Bureau, Employee Benefits Research Institute, Statistical Abstract of the United States - 1999, Congressional Budget Office, Barents Group, Lewin Group, RPC estimates.

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